

# ANNOUNCEMENT

## OFFICE OF COUNCILMEMBER BENJAMIN HUESO

**Councilmember Ben Hueso and Athletes for Education join to create the “Brighter Futures through Fitness” program to fight childhood obesity and diabetes**

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**WHEN:** Tuesday, October 9, 2007- 11:45 a.m.

**WHAT:** Councilmember Hueso is partnering with Athletes for Education and San Diego Chargers Luis Castillo and Kassim Osgood to help health and fitness organizations in District 8 serve youth who are at risk of diabetes and obesity. As his first effort to raise money for the program, Councilmember Hueso will swim across the San Diego Bay from the Marina Park in downtown to Tidelands Park in Coronado.

Obesity is a growing problem that is affecting a larger percentage of youth every year (statistics attached). For this reason, Councilmember Hueso will be asking for participation from organizations who wish to assist youth in living healthier lives, as well as reach out to businesses and individuals who wish to contribute to this great cause.

**WHO:** City of San Diego Councilmember Ben Hueso, San Diego Chargers Luis Castillo and Kassim Osgood, Athletes for Education Director Steve Haynes

**WHERE:** 229 Marina Park Way, San Diego 92101 (behind the San Diego Convention Center, past the San Diego Rowing Club)

**Make a Pledge Today! 100% of the Proceed go to fight childhood obesity and diabetes!**

### **Donation Levels:**

Level 1- Bass Level: \$1,000

Level 2- Bluegill Level: \$3,000

Level - Trout Level: \$5,000

*Checks Payable To: “Athletes for Education” EIN Number: 33-0631604  
(Memo Line: Brighter Futures Through Fitness)*



## **San Diego City Council District Eight's Brighter Futures through Fitness Program**

**Mission:** To create a youth educational empowerment program that expands and improves access to resources that will improve long-term health, improve physical fitness, and increase self-esteem, self-respect, and a more positive future outlook.

**Vision:** Brighter Futures through Fitness Program will work to create an environment where physical fitness in youth that are normally obese or at-risk of being obese, is an attainable goal. Some of the methods will be in providing greater access to fitness resources and strong encouragement to work toward a personal long-term health lifestyle. Through improved physical fitness, youth will lead healthier and more productive lives with a greater sense of self-esteem, self-confidence, and develop respect for discipline and moderation.

**The Problem:** Obesity and diabetes is becoming a greater problem in the United States overall and seems to be more acute in community where poverty is prevalent. In San Diego City's District 8 Council District, childhood obesity and diabetes is reaching tragic levels and threatens to pose a future health crisis. The future human suffering, cost of medical care, and loss of economic productivity will present insurmountable challenges for the government and society to deal with adequately. In communities where health services are already grossly deficient, a cost effective and efficient program needs to be developed that will raise awareness, empower, and motivate youth to take proactive approaches to improve their long term health.

**The Approach:** Brighter Futures through Fitness will work to reduce youth obesity and diabetes by bringing greater awareness of the importance of a healthy lifestyle through public service announcements, providing increased contact with positive role models and mentors, providing financial support to encourage participation in youth sports and fitness programs.

Brighter Futures through Fitness will appeal to youth through the concept that fitness is fun, socially acceptable, and financially feasible. Where financial assistance is required to avail youth to those fitness programs that are deemed fun and of interest, Brighter Futures will assist youth by providing assistance for membership fees, competition or recreational event participation fees, sporting equipment, health classes, training and educational programs and recreational outings.

**Partnerships:** Brighter Futures will collaborate with organizations that are providing health and educational opportunities, to enhance their ability to serve the youth community. Some participating organizations are:

- **Barrio Station**
- **Borderview YMCA**
- **Boys and Girls Club**
- **City of San Diego Park and Recreation Department**
- **San Diego Comprehensive Health Center**
- **San Diego Family Health Center**
- **San Ysidro Family Health Center**
- **Sherman Heights Community Center**

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*Mail Checks to:*

*Councilmember Ben Hueso*

*C/o Brighter Futures Through Fitness Program*

*202 C Street, MS 10A*

*San Diego, CA 92101*



**COUNCILMEMBER BEN HUESO  
CITY OF SAN DIEGO  
DISTRICT 8  
Brighter Futures through Fitness Program**

**Statistics on Child and Adolescent Obesity and Diabetes**

*Obesity and Diabetes in District 8 Children*

- Children in District 8 alone have the 3<sup>rd</sup> highest obesity rate in the state of California.
- In a 2001 California Department of Education study of 5th, 7th and 9th graders- 26% of children in my district were found to be overweight and 42.6% were found to be unfit.
- 29% of middle school aged children in my district already experience “black neck syndrome” a pre-cursor sign to Type 2 Diabetes.

*Obesity in Children (nationally)*

- According to the US National Health and Nutrition Examination Survey for 1999–2002, an estimated 16 percent of children and adolescents ages 6–19 years are overweight.
- Approximately one in five children in the US between the ages of 6 and 17 are overweight.
- About 25 percent of all white children are overweight, while 33 percent of African American and Hispanic children are overweight.
- Over 10 percent of younger preschool children between ages 2 and 5 are overweight, up from 7 percent in 1994.

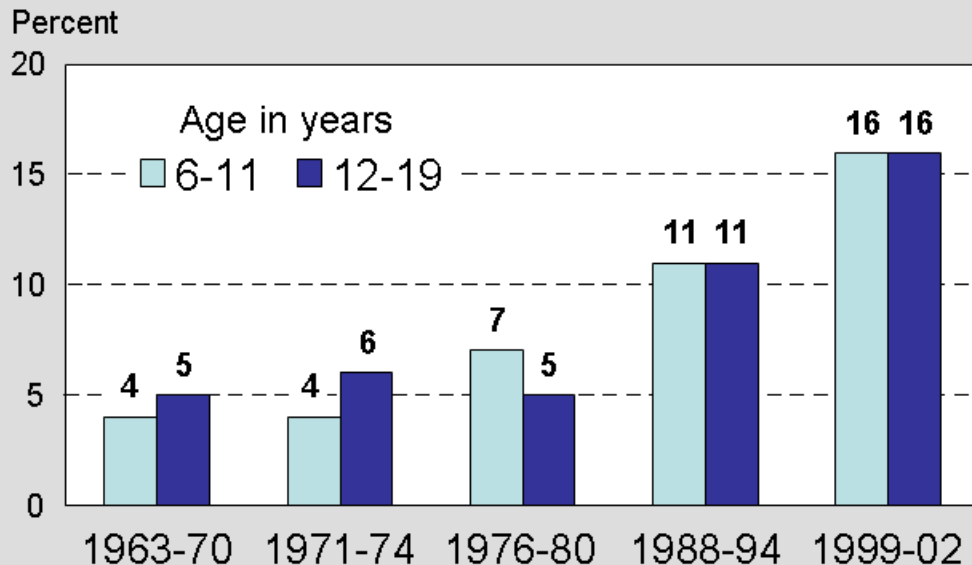
According to surveys of overweight/obese children and teens:

- 60 percent of overweight children already have one risk factor for heart disease
- 85 percent of children diagnosed with type 2 diabetes are obese
- 25 percent of overweight children are already showing early signs of type 2 diabetes
- Approx 20 percent of newly diagnosed cases of childhood diabetes are type 2, associated with obesity. This figure is up from 4 percent in 1990.

### Leading Environmental Cause of Childhood Obesity- Insufficient Calorie Expenditure Through Exercise

The average American child spends a significant percentage of leisure time watching TV, or playing computer games. Few calories are expended during this sedentary activity. Not surprisingly, obesity rates are higher among children and teenagers who frequently watch television. In addition, only a small minority of children (1 in 5) regularly participate in after-school sports or extra-curricular physical activity.

**Figure 1. Prevalence of overweight among children and adolescents ages 6-19 years**



NOTE: Excludes pregnant women starting with 1971-74. Pregnancy status not available for 1963-65 and 1966-70. Data for 1963-65 are for children 6-11 years of age; data for 1966-70 are for adolescents 12-17 years of age, not 12-19 years. SOURCE: CDC/NCHS, NHES and NHANES

### Diabetes in Children

- Diabetes is one of the most common chronic diseases in school-aged children.
- In the United States, about 176,500 people under 20 years of age have diabetes.
- About 1 in every 400 to 600 children has type 1 diabetes.
- Each year, more than 13,000 children are diagnosed with type 1 diabetes.

- The incidence of type 1 is about 7 per 100,000 per year in children ages 4 and under, 15 per 100,000 per year in children 5 to 9 years, and about 22 per 100,000 per year in those 10 to 14 years of age.
- About 75 percent of all newly diagnosed cases of type 1 diabetes occur in individuals younger than 18 years of age.
- Currently, because 10 to 17 percent of children and teens are overweight – about double the number of two decades ago – increasing numbers of young people have type 2 diabetes.
- In several clinic-based studies, the percentage of children with newly diagnosed diabetes classified as type 2 has increased from less than 5 percent before 1994 to 30 to 50 percent in subsequent years.